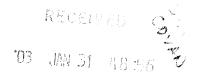


LREG 01/96

## **HAWAII STATE ETHICS COMMISSION**

1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809

TEL.: 587-0460 FAX: 587-0470



## LOBBYIST REGISTRATION FORM

(See back of this form for instructions)
(Type or Print Clearly)

PART I LOBBYIST				
NAME(Last)	(First)	(Middle)		TELEPHONE
Slovin	Gary	М.		547-5600
MAILING ADDRESS (Street)		(City)	(State)	(Zip Code)
P. O. Box 3196		Honolulu	HI	96801
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)				TELEPHONE
Goodsill Anderson Quinn 8	& Stifel			547-5600
MAILING ADDRESS (Street)		(City)	(State)	(Zip Code)
Same as above.				
PART II ORGANIZATION  NAME OF ORGANIZATION YOU LO			Par National Association (Control of Control	TELEPHONE
	,			973/
Covanta Energy Corporation  MAILING ADDRESS (Street)	on	(City)	(State)	(7ip Code)
, ,			` ,	(Zip Code)
40 Lane Road	FOR PREPARING ORGANIZATION	Fairfield	NJ	07007
NAME OF PERSON RESPONSIBLE	FOR PREPARING ORGANIZATION	N'S EXPENDITURES STATEME	N I	TELEPHONE
Paula Soos	· · · · · · · · · · · · · · · · · · ·	<del></del>		882-7081
MAILING ADDRESS (Street)		(City)	(State)	(Zip Code)
Same as above		×		
PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY				
FART III DESCRIPTION C	OF SUBJECTS OF ON WITH	CH TOU EXPECT TO LO	700 t	
Agriculture	Education	Human Services	□ S E	cience, Technology & conomic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Rela International Affairs	ations, To	ourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Tı	ransportaion
Culture, Arts, Historic Preservation	Health	Planning, Land & Wate Use Management	er 🔲 O	ther: (indicate below)
X Ecology, Energy,	Housing	Public Safety & Correc	tions	* .
Environmental Protection			· · · · · · · · · · · · · · · · · · ·	
PART IV CERTIFICATION	I OE I ORRVIST			1
PART IV CERTIFICATION OF LOBBYIST  I hereby exprtify that the information furnished above is, to the best of my knowledge, correct and complete.				
		1/	32/0	3
(8	ignature of Lobbyist)		(Date	
Û				
PART V AUTHORIZATION	N TO LOBBY	TITLE OF AUTHORIZING OF	FICER OR PFI	RSON REPRESENTED
		Senior Director, Government Relations		
Paula Soos	anhla)	Sentor Director, GOV	етишент ке	TELEPHONE
NAME OF ORGANIZATION (if applic Covanta Energy Corporati				973/ 882-7081
MAILING ADDRESS (Street)	<u> </u>	(City)	(State)	(Zip Code)
40 Lane Road		Fairfield	NJ	07007
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.				
What X				
WWV	orizing Officer or Person Represent	ted)	(Date	9)
I REG 01/96 (Signature of Author	onzing Orgon of Ferson nepresent		1231	·